

ENTRY BLANK

Email: info@fairhillthoroughbredshow.com

Mail: 25 Martin Rd., Coatesville, PA 19320 : 610-593-7348

No.	Name of Horse	Sex	Color	Height	Age	Coggins	Fair Hill Thoroughbred Show
Sire		Dam			TIP No.		
Name of Rider #1		Age	Division Name		Class Numbers		
Name of Rider #2		Age	Division Name		Class Numbers		

By entering this Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the rules of the horse show. I agree to be bound by the rules of the competition. I will accept as final the decision of the Show Committee on any question arising under the rules and agree to release and hold harmless the competition, their officials, directors and employees for any action taken under the rules. I represent that I am eligible to enter and/or participate under the Rules and every horse and rider I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Competition may use or assign photographs, videos, audios, cablecasts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport, or Jockey Club. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or misappropriation. **Release, Assumption of Risk, Waiver, and Indemnification: This document waives important legal rights. Read it carefully before signing:** I AGREE in consideration for my participation in this Competition to the following: I AGREE that the "Competition" as used herein includes the Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers or affiliates I AGREE that I choose voluntarily in the Competition with my horse, as a rider, driver, handler, vaultor, longeur, lessee, owner, agent, coach, trainer, or as a parent/guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering or death ("Harm"). I AGREE to hold harmless and release the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of the Competition. I AGREE to indemnify (that is to pay any losses, damages, or costs incurred by) the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse while at the Competition. I have read the rules and regulations about protective equipment, if applicable, and I understand that I am entitled to wear Protective equipment without penalty, and I acknowledge that the Competition strongly encourages me to do so while WARNING that no protective equipment can guard against all injuries. If I am a parent or guardian of a junior exhibitor, I consent to the child's participation and AGREE to all the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf. I represent that I have the requisite training, coaching and abilities to safely compete in this competition. BY SIGNING BELOW, I AGREE to be bound by all applicable Competition Rules and all terms and provisions of this entry blank and all terms and provisions of this Prize List for the Competition. If I am signing and submitting this Agreement Electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand. I agree that I am bound by the local and state laws regarding my participation in equestrian activities, and will abide by any and all rules and/or restrictions or procedures set forth by local and state authorities.

Entry Fees: \$ _____

Stall Fees: \$ _____

Straw Fees: \$ _____

Total Due: \$ _____

OWNER Name _____ Address _____ _____ Phone _____ Email _____ Tax ID _____ Signature _____	RIDER Name _____ Address _____ _____ Phone _____ Email _____ Signature (or of parent if a minor) _____	TRAINER Name _____ Address _____ _____ Phone _____ Email _____ Signature _____	Payment Method : Cash/ Check Credit Card # _____ Exp. Date _____ CCV _____ Billing Zip _____ Name on Card: _____
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